RECEIVED **2**001/021 CENTRAL FAX CENTER

OCT 0 3 2006

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

CERTIFICATE OF FACSIMILE TRANSMISSION 37 C.F.R. 1.6 &1.8 I CERTIFY THAT THIS CORRESPONDENCE IS BEING TRANSMITTED BY FACSIMILE TO THE PATENT AND TRADEMARK OFFICE ON THE DATE AND TO THE NUMBER SHOWN BELOW. FAX. NO. 571-273-8300 COMPRISING TWENTY (20) SHEETS INCLUDING THIS PAGE.

Reg, No. 36,427

H1799-00219

## OCT 0 3 2006

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Assignee: THERMAL CORP.

Patent No:

Serial No.: 10/685,954

Issue Date:

Filed: 10/15/2003

Atty. Dkt. H1799-00180

FOI: FLUID CIRCUIT HEAT TRANSFER

Date: 3 October 2006

DEVICE FOR PLURAL HEAT SOURCES

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

## REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS

Dear Sir:

The undersigned Attorney of Record on behalf of himself and all Partners and associates of Duane Morris LLP, and the attorneys/agents associated with Customer number 41396 or Customer number 08933, hereby applies to withdraw as attorney(s) of record, and requests approval and acknowledgment by the Office.

The reason for this request is that the assignee of record has requested that the file be transferred to the below-named attorney and law firm. All related property concerning the subject patent has been delivered to this alternate counsel. Due notice to the Assignee has been provided, by copy of this Request, mailed concurrently to the address of the assignee as stated hereinafter. To the best of my knowledge and belief, there is no near or impending response period applicable to the matter and the Applicant has obtained other representation.

Please change the correspondence address and direct all future correspondence to:

Christopher B. Austin Michael Best & Friedrich, LLP 100 E. Wisconsin Avenue, Suite 3300 Milwaukee, WI 53202.

Respectfully submitted,

Reg. No. 36,427 Duane Morris LLP

30 S. 17th Street

nuel W. A

Philadelphia, PA 19103-4196

215-979-1255